
Table of Contents

State/Territory Name: Colorado

State Plan Amendment (SPA) #: 19-0034

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Denver Regional Office
1961 Stout Street, Room 08-148
Denver, CO 80294



REGION VIII - DENVER

November 29, 2019

Kim Bimestefer, Executive Director
Department of Health Care Policy & Financing
1570 Grant Street
Denver, CO 80203

Dear Ms. Bimestefer:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 19-0034. This amendment designates the individuals authorized by Governor Polis to submit State Plan Amendments and reflects that Tracy Johnson is the Department's new Medicaid Director and Rachel Entrican is the Department's new Legal Division Director.

Please be informed that this State Plan Amendment was approved today, with an effective date of October 1, 2019. We are enclosing the CMS-179 and the amended plan page(s).

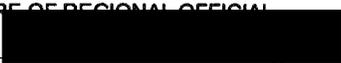
If you have any questions concerning this amendment, please contact Curtis Volesky at (303) 844-7033.

Sincerely,



Curtis Volesky
Acting Deputy Division Director
Western Regional Operations Group
Denver Regional Office
Centers for Medicaid and CHIP Services

cc: Laurel Karabatsos, Colorado
John Bartholomew, Colorado
Russell Ziegler, Colorado
Whitney McOwen, Colorado
Jami Gazarro, Colorado

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER: 19 - 0034	2. STATE: COLORADO
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE: October 1, 2019	
5. TYPE OF PLAN MATERIAL (Check One): NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS A NEW PLAN X AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 430.12(b)		7. FEDERAL BUDGET IMPACT: a. FFY 2018-19: \$ <u> 0 </u> b. FFY 2019-20: \$ <u> 0 </u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Section 7.4 page 90 Governor's Designation Letter		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Section 7.4. page 90 Governor's Designation Letter (18-0009)	
10. SUBJECT OF AMENDMENT: State Governor's Review			
11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT X OTHER, AS SPECIFIED COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Governor's letter dated 29 March, 2018 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: Colorado Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203-1818 Attn: Lauren Reveley	
13. TYPED NAME: Tracy Johnson			
14. TITLE: Medicaid Director			
15. DATE SUBMITTED: November 21, 2019			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED November 21, 2019		18. DATE APPROVED November 29, 2019	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2019		20. SIGNATURE OF REGIONAL OFFICIAL: 	
21. TYPED NAME Curtis Volesky		22. TITLE Acting Deputy Division Director, WROG	
23. REMARKS			



COLORADO

Governor Jared Polis

October 11, 2019

Mary Marchioni
Branch Manager
Centers for Medicare & Medicaid Services
1961 Stout Street
Denver, CO 80294

Dear Ms. Marchioni:

We are pleased to designate the following individuals in the Department of Health Care Policy & Financing as the individuals authorized to submit the State Plan and/or State Plan Amendments regarding Colorado's Medicaid program, effective October 1, 2019:

- Kim Bimestefer, Executive Director
- John Bartholomew, Chief Financial Officer/Finance Offer Director
- Tracy Johnson, Medicaid Director/Health Programs Office
- Rachel Ollar Entrican, Legal Division Director

Please direct any questions to Lauren Reveley at (303) 866-2718 or lauren.reveley@state.co.us.

Sincerely,


Jared Polis
Governor

TN No. 19-0034

Approval Date: 11/29/2019

Effective Date: 10/01/2019

